| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | BA | 79385 | |
| O.I.P.E. CLASSIFIER | | | 3/9 |
| FORMALITY REVIEW | | 61001 | 5-3-00 |
| RESPONSE FORMALITY REVIEW | | '' '' | 9/22/00 |

## INDEX OF CLAIMS

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| ✔ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| – | (Through numeral)... Canceled | A | Appeal |
| ÷ | Restricted | O | Objected |



| Claim Final | Claim Original | Date |
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| Claim Final | Claim Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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